

PENISTONE
URBAN DISTRICT COUNCIL



ANNUAL REPORT
of the
Medical Officer of Health
for the Year
1963



PENISTONE URBAN DISTRICT COUNCIL.

HEALTH COMMITTEE, 1963.

COUNCILLOR W. MURPHY (Chairman of the Committee)

" E. WARING (Vice-Chairman of Committee)

" A. MEARS, J.P. (Chairman of Council)

" W. GLEDHILL (Vice-Chairman of Council)

" J.R. ATKINSON

" D. FERGUSON

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" MRS. E.M.K. GREEN

" T.H. HELLIWELL

" D.W. MYERS

" S. PALFREYMAN, ~~J.P.~~

" R.M. SMYTHE

" G.R. TINKER, J.P.

" C.R. VARLEY

" C. WATTS

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health.

J. MAIN RUSSELL, M.B., Ch.B.(Edin.), B.Hy., D.P.H.

Deputy Medical Officer of Health and
Senior Assistant County Medical Officer.

F.C. ARMSTRONG, M.B., Ch.B., D.P.H.

Surveyor and Public Health Inspector.

D. TUTIN, M.A.P.H.I., Cert. S.I.E.J.B., Cert. M. & F.I.

Additional Public Health Inspector~~s~~.

D.N. FURNISS, M.A.P.H.I., Cert. S.I.E.J.B., Cert. M. & F.I.

J. McCROSSON, M.R.San.A., ^{authorised} ~~Area~~ Meat Inspector.

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MORTOMLEY HALL, HIGH GREEN, NEAR SHEFFIELD.

Tel. No. High Green 292.

PENISTONE URBAN DISTRICT COUNCIL.

Annual Report of the Medical Officer of Health
for the year 1963.

To the Chairman and Members of Penistone Urban District Council.

Lady and Gentlemen,

I have the honour to submit my Annual Report upon the Health Services of the Penistone Urban District for the year ended 31st December, 1963.

The Vital Statistics for the year are quite encouraging when compared with 1962. The Birth Rate has fallen a decimal point, and at 15.3 per 1,000 of the estimated population is much lower than that for England and Wales and for the West Riding Administrative County. There seems to have been a steady increase in the Birth Rate in England and Wales over the last five years, and also in the Administrative County of the West Riding, but the trend of increase ceased in 1961 in the Penistone Urban District, and since then it has steadily decreased, admittedly only a decimal point each year. The corrected rate for the district is 15.9. The Death Rate has increased very slightly, and approximates very closely to that for the country generally. The corrected rate is 14.0. The Still-birth Rate has recovered markedly from last year's disappointing rate. At 9.0 per 1,000 Live and Still-births it is the second lowest rate we have had since 1952, and is only about half the rate for England and Wales and the West Riding Administrative County. There was only one still-birth (male) during the year, compared with 5 (3 male and 2 female) in 1962. The Infantile Mortality Rate has fallen, and is only about a quarter the rate it was in 1962. At 9.1 per 1,000 live births the figure compares very favourably with those for England and Wales, at 20.9, and the West Riding Administrative County, at 23.0. There was one infantile death, a child dying before the age of two weeks, the cause of death being prematurity.

A look at the tables giving the principal causes of death indicates that 37 of the total of 89, i.e. approximately 41.5%, were due to diseases of the circulatory system, including coronary disease, the latter accounting for nearly half of them. The next highest group in the list of causes of death is malignant disease, in which there were 19 registered. Of those there were 3 deaths from cancer of the lung, a similar number to the figure for 1962. I do not apologise for mentioning once more the relationship between heavy cigarette smoking and cancer of the lung. During the year we have talked quite a lot about this subject and organised quite a fair amount of propaganda. Later in the report we will be mentioning specifically the special efforts we have made. I think the public are aware of this problem, and we hope that the public at large will think about it and, dare I hope, do something about it. There were 3 deaths from accidents during the year, one a Road Accident and the other two Home Accidents, a male (87) and a female (78) as a result of falls.

I must put on record again how grateful I am to the enthusiasm of the members of the Penistone Home Safety Committee. They meet regularly and interest themselves extensively in this matter of Home Safety. Similarly, the very active Road Safety Committee are also responsible for the dissemination of much propaganda in connection with Road Safety.

The Infectious Diseases picture for the year shows a sharp increase compared with that for 1962. There was a total of 125 cases compared with 65 in 1962. The increase was due to a sharp rise in the incidence of Measles, 112 cases being notified. The cases occurred in the early part of the year, 61 being notified in the first quarter and 50 in the second, with only one in the third. In the first quarter of the year Penistone township itself was the main part of the district affected where, of the 61, 54 cases were notified. During the second quarter, whilst the incidence waned in Penistone, it cropped up very sharply in Thurlstone, where a total of 40 cases were notified out of the quarterly 50. There were 6 cases of Whooping Cough notified and 7 cases of Scarlet Fever.

Mr. Tutin, the Senior Public Health Inspector, has prepared a statistical report with comment, which I include in this document in full. In the Penistone Urban District there are a total of 2,576 houses, and of those 98% are connected to sewers. 1% are drained to private drainage schemes, and the other 1% are provided with a less satisfactory form of sewage disposal, which remained adequate because of the careful supervision during the year. I think that the members of the Council are aware of the unsatisfactory conditions at the Sewage Disposal Works, and how urgent it is that new Works are provided. You are aware of the difficulty about the establishment of a site, and the proposal to establish a Disposal Works at Oxspring has not yet matured. There is a lot of difficulty involved which, I have no doubt, will be overcome. However, the matter is urgent and I hope there will be no long delay before something is done about it.

The water supply to the township is very good indeed. In all, 2,535 houses are supplied by water from a public supply. The remaining 41 obtain their supplies from private sources which, although suspect on occasion, were never found to be unsatisfactory, either qualitatively or quantitatively. During the year, in the areas other than Hoylandswaine, 189 samples were taken for bacteriological examination, and all but one proved satisfactory. Hoylandswaine is supplied from a different source compared with the origin of supplies for the Penistone township generally. In Hoylandswaine itself three samples were taken and all produced satisfactory results. Chemical and plumbo-solvency tests were carried out quarterly. 16 samples were taken in the Urban District from areas other than in Hoylandswaine. No sample was taken from Hoylandswaine. In all 20 samples were taken, and each proved satisfactory.

The Public Health Inspectors, in the past few years, had to spend a considerable amount of their time in the local Abattoir on meat inspection. This involved, on occasions, overtime work and working at weekends. The situation was resolved to a certain extent during 1963 when we appointed Mr. McCrosson as a Meat Inspector, and his work is exclusively in this field.

In concluding this short preamble to my report I would like to put on record my thanks to the Chairman and members of the Health Committee for their overall support and encouragement to me and my staff during the year. I would like also to thank the Clerk to the Council and other members of the staff for their co-operation and advice at all times when I sought it. I would like to extend to Mr. Tutin and his staff in the Public Health Department my grateful thanks for their continued devotion to duty, and their help to me personally on many occasions. To Dr. Armstrong, my Deputy, I would like to put on record my grateful appreciation of his advice and support in the duties, and for his personal kindnesses to me.

I am,

Your obedient servant,

J. MAIN RUSSELL

Medical Officer of Health.

DISTRICT STATISTICS IN BRIEF.

The Penistone Urban District covers an area of 5,593 acres. The district is divided into 3 parts, Penistone, Thurlstone and Hoylandswaine.

The Rateable Value of the District at the 1st April, 1963 was 195,822, whilst the product of a penny rate was £272. 2s. 0d.

VITAL STATISTICS.

POPULATION.

The Registrar-General has given his estimation of the population at mid 1963 as 7,200. This is an increase of 70 as compared with 1962.

BIRTHS.

There were 110 live births registered in the district during the year. Of these 55 were males and 55 females. There were four illegitimate births, 2 male and 2 female.

The uncorrected BIRTH RATE was 15.3 per 1,000 of the estimated population. After application of the Comparability Factor (1.04) issued by the Registrar-General, the corrected Birth Rate was 15.9.

STILL-BIRTHS.

There was one male still-birth registered in the district during the year.

DEATHS.

89 deaths were attributed to the district during 1963; of these 52 were males and 37 females.

The CRUDE DEATH RATE was, therefore, 12.4 per 1,000 of the estimated population. By application of the Death Comparability Factor (1.13) the corrected rate was 14.0.

Set out below are tables of Live Birth Rates, Still-birth Rates and Crude Death Rates, with those rates for other parts of the Country. From these tables it can be seen how the district compares with the Country generally.

RATES PER 1,000 OF THE ESTIMATED POPULATION.

<u>Year.</u>	<u>England and Wales.</u>	<u>West Riding Administrative County.</u>	<u>Penistone U.D.</u>
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LIVE BIRTHS

1963	18.2	18.2	15.3
1962	18.0	17.8	15.4
1961	17.4	17.2	16.3
1960	17.1	16.9	16.6

DEATHS (Crude Death Rates)

1963	12.2	12.0	12.4
1962	11.9	12.0	12.2
1961	12.0	12.1	9.6
1960	11.5	11.5	12.5

STILL BIRTHS

(Rates per 1,000 Live and Still Births)

1963	17.3	18.7	9.0
1962	18.1	18.5	43.5
1961	18.7	20.2	8.6
1960	19.7	22.4	17.5

INFANT MORTALITY.

There was one death of a child under one year of age during 1963, equivalent to an Infantile Mortality Rate of 9.1 per 1,000 Live Births.

AGE DISTRIBUTION OF INFANT DEATHS.

Cause of Death.	Under 1-wk.	1-2 wks	2-3 wks	3-4 wks	Total under 4-wks	1-3 mths	3-6 mths	6-9 mths	9-12 mths	Total under 1-yr.
Prematurity	-	1	-	-	1	-	-	-	-	1

MATERNAL MORTALITY.

There were no maternal deaths during the year.

EPIDEMIC DISEASES.

There were no deaths in the Epidemic Diseases (other than Tuberculosis) Group during the year.

PRINCIPAL CAUSES OF DEATH.

<u>INFECTIVE DISEASES.</u>	<u>MALE</u>	<u>FEMALE</u>	<u>TOTAL</u>
Tuberculosis - Respiratory	1	1	2
<u>CANCER.</u>			
Stomach	2	3	5
Lung	2	1	3
Breast	-	1	1
Other sites, including Leukaemia	6	4	10
<u>DIABETES.</u>	-	1	1
<u>VASCULAR DISEASE OF NERVOUS SYSTEM.</u>	7	6	13
<u>CIRCULATORY SYSTEM.</u>			
Coronary Disease	14	3	17
Hypertension with Heart Disease	1	-	1
Other Heart Diseases	10	6	16
Other Circulatory Disease	-	3	3
<u>RESPIRATORY SYSTEM.</u>			
Pneumonia	1	-	1
Bronchitis	3	-	3
<u>DIGESTIVE SYSTEM.</u>			
Gastritis, Enteritis and Diarrhoea	-	1	1
<u>VIOLENCE.</u>			
Motor Vehicle Accidents	1	-	1
All other accidents	1	1	2
<u>OTHER DEFINED and ILL-DEFINED DISEASES.</u>	3	6	9
All causes	52	37	89

AGE DISTRIBUTION OF DEATHS

<u>AGE GROUP.</u>	<u>MALE.</u>	<u>FEMALE.</u>
Under 1 year	-	1
1 - 10 years	-	1
10 - 15 years	1	-
15 - 25 years	-	1
25 - 45 years	2	-
45 - 65 years	11	6
Over 65 years	38	28
TOTAL	52	37

INQUESTS.

Four Inquests were held, and in 3 cases the cause of death was certified by the Coroner after Post Mortem Examination without Inquest.

NATIONAL HEALTH SERVICE ACTS, 1946/57.

Vital Statistics.

Live Births	
Number	110
Rate per 1,000 population	15.3
Illegitimate Live Births per cent of total live births	3.6
Stillbirths	
Number	1
Rate per 1,000 total live and still-births	9.0
Total Live and Still-births	111
Infant Deaths (deaths under 1 year)	1
Infant Mortality Rates	
Total infant deaths per 1,000 total live births	9.1
Legitimate " " " " legitimate live births	9.4
Illegitimate " " " " illegitimate " "	-
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	9.1
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	-
Perinatal Mortality Rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)	9.0
Maternal Mortality (including abortion)	
Number of deaths	-
Rate per 1,000 total live and still-births	-

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Infectious Diseases other than Tuberculosis.

During the year 125 cases of Infectious Disease were notified. They were as follows :-

Scarlet Fever	7
Measles	112
Pneumonia	-
Whooping Cough	6
Dysentery	-
Food Poisoning	-
Meningococcal Infection	-
	125

AGE DISTRIBUTION OF INFECTIOUS DISEASES.

DISEASE	AGE GROUP										TOTALS		
	0 - 1 yr.	1 - 2 yrs.	2 - 3 yrs.	3 - 4 yrs.	4 - 5 yrs.	5 - 10 yrs.	10 - 15 yrs.	15 - 25 yrs.	25 - 35 yrs.	35 - 45 yrs.		45 - 65 yrs.	65 yrs. & over	Age unknown.
Measles	3	10	17	14	21	44	1	2	-	-	-	-	112
Scarlet Fever	-	-	-	-	-	3	3	1	-	-	-	-	7
Whooping Cough	-	-	1	1	-	2	2	-	-	-	-	-	6
Dysentery	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Pneumonia	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal Infection	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Poliomyelitis	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS :	3	10	18	15	21	49	6	3	-	-	-	-	125

ATTACK RATE OF COMMONER INFECTIOUS DISEASES.

<u>Disease</u>	<u>England and Wales</u>	<u>West Riding Administrative County</u>	<u>Penistone U.D.</u>
Measles	12.78	11.72	15.55
Whooping Cough	0.74	0.55	0.83
Scarlet Fever	0.37	0.45	0.97
Pneumonia	0.30	0.39	0.00
Poliomyelitis (Paralytic)	0.00	0.00	0.00
Dysentery	0.67	0.32	0.00
Meningococcal Infection	0.01	0.02	0.00

SCARLET FEVER.

During the year 7 cases of Scarlet Fever were notified, 3 less than in the previous year. The attack rate was 0.97, compared with a rate of 0.37 for England and Wales and 0.45 for the West Riding Administrative County. Two of the cases were notified during the first quarter of the year and the other five occurred in the fourth quarter. Of the total, 4 cases were over the age of 10 years; 3 were admitted to hospital because facilities at home for effective treatment and isolation were not satisfactory. The type of infection was generally mild.

WHOOPING COUGH.

There were 6 cases of Whooping Cough notified during 1963, 1 in the first quarter and 5 in the fourth quarter. The attack rate for this disease is slightly greater than that for the rest of the country. Vaccination against Whooping Cough is readily available, both at the Clinic and by the family doctor. The Vaccine is available in the combined form (triple) and as a single antigen. When we receive a notification of a case of Whooping Cough we immediately check up on our records to find if there is any history at all of these children having received vaccination at any time. In the case of the 6 notified in Penistone not one had been immunised. During the year there were 109 children who received protection, compared with 74 in the previous year and 103 in 1961.

MEASLES.

The district has never really been free from Measles for a year or two now, and the incidence fluctuates in severity quite considerably. Last year we had 52 cases and in the previous year there were 298 cases. In 1963 there were 112 cases. You will remember that in 1962 we had a recurrence of Measles during the last quarter. The incidence had continued over the New Year and extended into 1963, as is obvious when we see that 61 cases occurred in the first quarter and 50 in the second, and only one for the rest of the year. The disease seemed to spread evenly throughout the district, appearing first of all in Penistone itself, and extending towards Thurlstone and Hoylandswaine.

We are still hoping that in the near future a Vaccine will be available as a protection against this disease, and when this comes about there should be a change in the Infectious Diseases picture throughout the country. Field trials are being carried out with this Vaccine, and from what I hear it seems to be satisfactory. I do not like Measles - it is highly infectious, can be very debilitating, and some very unhappy complications can arise in a case suffering from the disease. Happily, no such unfortunate sequelae occurred to my knowledge in the Penistone area.

DIPHTHERIA.

There was no Diphtheria notified during the year, as we now come to expect, but we do not allow the disease to be forgotten. In our health educational propaganda work we still keep the need for protection against this disease before the minds of the young mothers and guardians of the babies and young people. In 1963 111 children received the primary immunisation, compared with only 82 in the previous year. Of this 111, 105 were under the age of 5 years, the remainder being in the age group 5 to 15 years. Booster doses of the antigen were given to 32 children, in almost every case when they received their first medical inspection on entry to school at the age of 5.

DISEASES OF THE ALIMENTARY TRACT.

Once again the district has been free of those diseases, which include such things as Food Poisoning, Dysentery, Typhoid, Paratyphoid, etc. Those diseases are caused by an organism which is conveyed to the patient by contaminated food or drink, principally because of unclean handling of food or feeding utensils. One would like to think, therefore, that the absence of the disease indicates a high standard of personal hygiene, and I do not think anyone would quarrel with me if I were to put that as the explanation. In Penistone the standard of personal hygiene is very good, and the Public Health Inspectors keep a very sharp eye on food premises and the handling of food generally.

POLIOMYELITIS.

It is seven years since we had a case of Poliomyelitis in Penistone Urban District, and 1963 was also free from the infection. Systematic immunisation against the disease is still being practised, and the ease with which it can be given to the patient now - Oral Vaccine - has reflected in its increased popularity both by the young mothers for their children, and by the young adolescents as well. I append here the Divisional Statistics for immunisation against Poliomyelitis. As I have mentioned in previous reports, it is difficult to give precise figures for each County District as there is inevitably an overlap, particularly when immunisation sessions are conducted at Clinics and in various schools.

PRIMARY IMMUNISATION.

Age Group.

Children born in 1963.
Children born in 1962.
Children born in 1961.
Children and young persons born in the years 1943 - 1960.
Young persons born in the years 1933 - 1942.
Others.

TOTALS :

Number of persons who have received:	
Salk Vaccine	Oral Vaccine
Two injections	Three doses
1	200
3	726
39	121
102	175
29	22
164	88
338	1,332

REINFORCING DOSES.

Number of persons given third injection of Salk Vaccine	...	...	...	99
Number of persons given fourth injection of Salk Vaccine	...	...	...	8
Number of persons given a reinforcing dose of Oral Vaccine after:				
(1) 2 Salk doses	...	...	...	187
(2) 3 Salk doses	...	...	...	54

SMALLPOX.

There was no need to adopt special measures to deal with a threatened invasion of this disease in the district as we had in the previous year. Nevertheless Vaccine is always available and could be provided at the Clinic or by the patient's own doctor. During 1963 eight children were vaccinated and two were revaccinated. Of this number, 3 were under the age of one year, 4 just before their second birthday, and 1 at the age of 15.

It is our policy now to offer vaccination when the child is a little older, say approximately 18 months, instead of the previous practice of vaccinating within the first 6 weeks.

TUBERCULOSIS.

During the year there were four cases of Tuberculosis notified, compared with nine in the previous year. The cases notified were 3 Pulmonary and 1 Non-Pulmonary, and the three chest infections were admitted to hospital for treatment.

In each case the Tuberculosis Health Visitor visited the home and she was also present at the Clinic when the patients were seen there by the Consultant Chest Physician. A thorough investigation was made in the families concerned, and all close contacts with the family, to try and pin-point the source of the infection. Everyone co-operated with the Health Visitor in this work, and attended for a check-up, including X-ray, when required.

This disease is getting less common than it used to be and furthermore much more is being done for the patient. Drug therapy is excellent and the result of early treatment is almost complete recovery. At least, the infection is arrested and contained if complete recovery has not, in fact, been reached.

So far as I am aware, no notified case of Tuberculosis required special consideration for rehousing.

B.C.G. VACCINATION.

You will remember during 1962 we reorganised the timing of the B.C.G. Vaccination so far as age grouping of the children was concerned. We now arrange for this to be done on entry into Secondary Modern or Grammar School, at the age of 11 to 12. You will remember also in the report I mentioned that, because of this reorganisation, there were no B.C.G. Vaccination sessions carried out in the school during the year. During 1963, however, we brought the scheme up-to-date but to provide treatment for all children at the earlier age group it meant that we had a larger number to deal with, in effect, all children from 11 to 14. The numbers so treated were considerably higher, but we have now established the new timing as a result of this large survey during 1963.

There were 526 children tested, and all but 70, who gave a positive result, were vaccinated. The positive reactions in the 70 cases mentioned were very slight indeed and did not call for any further investigation so far as we were concerned. Their reaction was enough to make us consider it was wiser not to vaccinate.

GENERAL PROVISION OF THE HEALTH SERVICES

HOSPITALS.

The General Hospitals available locally for the Penistone area are those in Barnsley and Sheffield. For certain parts of the area it may be more convenient to use the Huddersfield Hospitals.

Infectious Diseases are accommodated chiefly in Kendray Hospital, Barnsley, and other cases may be dealt with at Lodge Moor, Sheffield. Maternity cases are dealt with at the Hallamshire Maternity Home, Chapeltown, St. Helen Hospital, Barnsley, and Princess Royal Maternity Home, Huddersfield.

LABORATORY FACILITIES.

All Laboratory work is carried out by the two Public Health Service Laboratories, one at Wakefield and one at the City General Hospital, Sheffield.

MORTUARY.

There is a Mortuary in Penistone and this serves the surrounding area.

AMBULANCE SERVICE.

As in previous years the Ambulance Service operated throughout the Division with great efficiency. No increase has been made in the number of vehicles operational, and six are still based on the main depot at Hoyland and two at the Penistone Fire Station.

During 1963 two vehicles have been replaced with the latest models incorporating a number of modern refinements such as side door loading, provision for the electrical heating of the premature baby cots when the vehicles are in motion, facilities for the attendant to gain entrance to the body of the ambulance from the driver's cab, to name but a few of these latest refinements. Economical use of vehicles is ensured with the radio tele-communication system, and the ability to direct an ambulance to an urgent case whilst operating in the vicinity, rather than turn out another vehicle, is now an accepted part of the efficiency of this service. There have been no alterations in the arrangements with other authorities, and liaison with other services operating in the Division has been maintained.

Towards the end of the year an opportunity was given to the ambulance personnel to take advantage of the B.C.G. scheme, and without exception all staff agreed and arrangements were made whereby one of my Medical Officers attended during the shift change-over and there was no disruption to the service.

CLINICS.

Below are the tables showing the various Clinics held within the Penistone District and, in certain cases, figures indicating the number of attendances during 1963.

CHILD WELFARE CENTRES.

Name and Address of Centre. Name of Doctor and Nurse in attendance.	Day and Time of sessions.	Total number of attendances during the year.	
		Number who attended for first time during 1963	Children up to 5 years
PENISTONE Shrewsbury Road. Dr. H.R. Meacock (Resigned October, 1963) Dr. E.M. Hendry (Comm. September, 1963) Mrs. H. Dransfield.	Monday p.m.	138	1,531
CAWTHORNE Golf House. Dr. J. Main Russell, Mrs. D.M. Simpson (Transferred to other area) Mrs. M. Orr, Miss M. Nagle.	Alternate Wednesdays p.m.	50	306
MOBILE CLINIC - CROW EDGE Dr. F.C. Armstrong, Mrs. D.M. Simpson.	Alternate Thursdays a.m.	36	205
MOBILE CLINIC - THURGOLAND Dr. F.C. Armstrong, Mrs. D.M. Simpson.	Alternate Thursdays p.m.	55	254

Other Clinics held at Shrewsbury Road, Penistone are :-

Ophthalmological; Ante-Natal Relaxation Classes;
Poliomyelitis Vaccination; Speech Therapy; Chiropody.

An Ante-Natal Clinic is held at Shrewsbury Road, Penistone every Tuesday afternoon except the fifth Tuesday; the General Practitioners in Penistone attend alternate weeks. The Midwives working in the Penistone Urban and Rural Areas attend each Clinic, and on a number of occasions the Health Visitor is also in attendance.

TUBERCULOSIS.

A Chest Clinic is held regularly at 46, Church Street, Barnsley, where the Consultant Chest Physician can see patients referred to him for opinion. The Tuberculosis Health Visitor also attends the Clinic and is in attendance when

the patients are seen by the Chest Physician. This is a very helpful arrangement, as it maintains a continuity of treatment and supervision both at Clinic level and at domiciliary level. A full investigation of any case referred to the Chest Physician can be carried out at this Clinic in Barnsley.

HEALTH VISITING SERVICE.

In 1962 the Health Visiting Service for the Penistone District was rather limited because of lack of staff and illness amongst the staff. Mrs. Dransfield was transferred in 1962 from Stocksbridge and she remained in Penistone area during 1963. She was handicapped because she was not mobile. During the year Mrs. M. Orr, the Health Visitor in Ecclesfield, was transferred to the Penistone District, and a new appointment was made, of Miss M. Nagle, also to work in the Penistone District. As a result of those two appointments the Health Visiting Service improved considerably, and group discussion classes were begun amongst the young mothers attending the various Clinics. Talks on various aspects of Health Education were given, accompanied by filmstrips and visual aids, and, in all, the service was improving considerably. The staff, therefore, at the end of the year was enough to give a first-class service, and the hope is that it will remain so.

During the year the Health Visitors amongst them made a total of 2,459 visits.

The Health Visiting staff as at 31st December, 1963 :-

<u>Name.</u>	<u>Address.</u>	<u>Telephone No.</u>
Mrs. H. Dransfield.	14A, Armitage Road, Deepcar.	Stocksbridge 2214.
Mrs. E.C. Haigh. (Comm. December, 1963)	Cliffe Hill, Cawthorne, Nr. Barnsley.	
Miss M. Nagle. (Comm. October, 1963)	60, Cockshutts Lane, Oughtibridge.	Oughtibridge 2405.
Mrs. M. Orr.	1, Bracken Hill, Burncross, Chapeltown.	Ecclesfield 4664.
Mrs. D.M. Simpson. (Relief)	35, Hill Top Road, Grenoside, Nr. Sheffield.	Ecclesfield 3219.

HOME NURSING SERVICE.

The staff at the 31st December, 1963 :-

Mrs. M.E. Henderson.	22, Cross Lane, Stocksbridge.	Stocksbridge 3338.
Miss M. Thompson. (D.N.M.)	34, Victoria Street, Penistone.	Penistone 2267.
Miss S. Thwaites. (D.N.M.)	34, Victoria Street, Penistone.	Penistone 2267.
Mrs. R. Chambers. (Relief)	76, Fir Tree Estate, Thurgoland.	Stocksbridge 3370.

The district was fully staffed by Home Nurses during the year. All the Nurses are mobile and all are available by telephone. The service is an important one, in that these ladies are at the beck and call of the General Practitioners to provide in the home a nursing service as near comparable as it is possible to get to that found in hospital. The Nurses maintain a high standard of efficiency by regular Refresher Courses so that they can keep abreast of modern techniques in nursing.

The Nurses give all types of injections, give general nursing care, they help and make comfortable the acute and chronic sick, and they also do pre-operative preparation and attention to patients who are due to be seen by a consultant for full scale investigation. These Nurses are provided with up-to-date equipment, and nothing is spared in the efforts of the County Council to see they are fully equipped for their work.

During the year the Nurses in the Penistone Urban and Rural Areas combined attended 163 cases, involving a total of 6,320 visits. It would be difficult, and involve a tremendous amount of research in the records, to give figures specifically for each of the respective County Districts, as the Nurses concerned are not bound by the District Council boundary but they overlap into other districts and their nursing statistics are considered as a whole.

MIDWIFERY SERVICE.

The Midwives available as at the 31st December, 1963 :-

<u>Name.</u>	<u>Address.</u>	<u>Telephone No.</u>
Miss J.L. Bain.	"Plevna", Silkstone Common, Nr. Barnsley.	Silkstone 356.
Miss M. Thompson.	34, Victoria Street, Penistone.	Penistone 2267.
Miss S. Thwaites.	34, Victoria Street, Penistone.	Penistone 2267.

The Midwifery Service, so far as staff is concerned, has been up to strength during the year. The Midwives are mobile and available on the telephone.

During 1963 the Midwives attended 105 confinements, 95 cases in the capacity of Midwives and 10 as Maternity Nurses. Of these cases 57 availed themselves of Pethidine and 28 of Trilene Analgesia.

The duties of the Midwife include ante-natal care of the expectant mother in the home and at the Clinic, delivery of the baby and the necessary visiting during the puerperium for a minimum of 10 days. In addition they conduct an Ante-Natal Class for expectant mothers, where group discussions take place, also demonstrations and instruction in various methods of helpful exercise.

HEALTH EDUCATION.

During 1963 the amount of Health Education carried out was limited because of the shortage of staff in the early part of the year. In the latter half of the year much more was done in Clinics, both Child Welfare and Ante-natal, by the Health Visitors who had been transferred to the area. The County Council have provided ample visual aids to help in this work, and we now possess new Filmstrip Projectors, films and screens to enable the work to be done much more effectively.

Subjects particularly suited to expectant mothers and nursing mothers, and in some cases to children, were discussed at open lectures and at group discussion. Then we had the not inconsiderable contribution to Health Education provided by the Home Safety Committee. During the year this Committee provided charts giving hints on First Aid in the Home to Old Age Pensioners and to children; not only that, but they provided bookmarks in schools, and at Christmas-time serviettes were provided bearing a Home Safety slogan. During the year a demonstration was organised by this Committee at the Fire Station, when the artificial respiration and cardiac resuscitation was demonstrated to a large number of people. This demonstration was particularly well received and particularly well done.

At the Penistone Show part of a marquee was made available for a special exhibition provided by the West Riding County Council, which dealt with all aspects of Home Safety. There were models of houses, showing the various accident hazards, and there were also moving models to demonstrate similar hazards. One of my field-workers was in attendance all day, and she reported that large numbers called to see the exhibition and discussed problems with her, and took away with them various hand-outs.

In October all the schoolchildren of a certain age group - in all 450 - were conveyed in a fleet of buses to the local picture house (kindly loaned by the Penistone Urban District Council, free of charge) and were shown the latest films on the subject of Home Safety. The Head Teachers in the schools concerned were most co-operative and helpful, and they kept the interest going amongst the children for some considerable time following this event.

I am certain that all the work that this Home Safety Committee are doing is rewarding and the benefits will be seen in due course.

Towards the end of the year the Central Council for Health Education mobile unit, with two experienced lecturers, visited the Division, and during the course of their visit they conducted lectures at the Grammar School in Penistone and these lectures consisted of cinematograph films, filmstrips, and actual pathological specimens. This was a rather intensive Health Education effort on "Smoking and Health", and I think that it did good as it was a talking point amongst young people and their parents for some time.

DOMESTIC HELP SERVICE.

There were 6,472 Domestic Help hours provided in the district during 1963, compared with 5,644 in the previous year. In all, 11 Domestic Helps were employed in 45 homes. There were 25 cases continuing from 1962. The following table explains the type of cases involved :-

General cases, 65 years and over	...	...	37
General cases under 65 years	...	...	4
Tuberculosis cases	...	...	-
Maternity cases	...	...	4
Others	...	...	-
			<hr/> 45

You will notice from the statistics above that the over 65 years age group receive the greatest number of Home Help hours. It is reasonable to expect this, but at the same time it must be recognised that this is no small contribution from the Local Health Authority's service to the Welfare Service, and must in some measure delay the need for these elderly people having to be admitted to Part III accommodation, or indeed to the Geriatric Unit of a hospital.

The Domestic Helps are a band of kind-hearted ladies who never appear bound by the strict limits of their terms of reference in the work they do. They have become to be accepted as a real "help" in the home. One thing the Home Helps are not able to do, and that is they cannot deal with the loneliness from which these old people suffer from time to time. In the evenings and during the hours when the Home Help is not in attendance these old people are sometimes left very much to themselves. This is when other relatives and Voluntary Organisations might come into the picture, and contribute something in this direction. Fortunately we do not find much of this loneliness amongst the aged in the Penistone District, and the picture generally is one of the elderly people being well cared for; at least, so far as my field-workers inform me this is the case, and I am glad to be able to report it so.

CHIROPODY SERVICE.

The Chiropody Service continues to provide a much needed help to certain sections of the population who require it and who are entitled to receive it. In the main it is the aged who benefit from this service, although handicapped persons and expectant mothers are entitled to benefit from the service as well.

During the year 107 patients attended at the Clinic in Shrewsbury Road, and in all 531 treatments were provided. There are cases who are unable to travel to the Clinic to obtain treatment because of various physical weaknesses, and those people are visited by the Chiropodist in their own homes and obtain the treatment there. Before this service can be provided, however, a doctor must certify that the patient is incapable of travelling to the Clinic, and the reasons for it. In Penistone during the year 59 patients were visited in their own homes, and in all 238 domiciliary treatments were provided.

MENTAL HEALTH SERVICE.

During the year the Mental Health Service has maintained a steady progress. You are no doubt aware that the Penistone Urban and Rural Districts come within the catchment area of the Storthes Hall Hospital.

I am glad to report that the liaison between the hospitals and the community service remains good, and there are regular monthly discussions between the hospital staff and the Mental Welfare Officers, when problems are dealt with at group discussion. There has been a lot of work done in the field of preventive care by the use of out-patient clinics, treatment clinics and day hospital attendances. Patients have been discharged from hospital and the Mental Welfare Officers have helped to support them in the community. In one or two instances patients have been able to remain in the community quite happily, and one is forced to reflect that a few years ago some of those patients would have required readmittance to hospital for further treatment.

Apart from the aged, no serious delays have occurred in the admission of patients. Unfortunately, there still remains a shortage of beds for the aged, the confused ambulant patients, who are unable to manage their own affairs. I find the hospitals extremely helpful in those cases, but this is an ever-growing problem and the hospitals are bound to find it difficult to accommodate all who seek admission.

The general policy in Mental Hospitals is that the acute case of mental illness should be admitted as soon as possible, given intensive treatment, and discharged home to the community without delay. This is progressive thinking in the care of mental patients, but it throws a tremendous burden of increased case load on the Mental Welfare Officers. We also find that the majority of those patients do well if they are seen regularly, and if they have confidence in the Mental Welfare Officers. It is essential that the treatment prescribed for them by the Hospital Consultant should be carried out meticulously, and the Mental Welfare Officers always look out for any neglect on the part of the patient to take medicaments.

Out-patient Clinics.

Out-patient Clinics for the people resident in Penistone are held at Barnsley Beckett Hospital on Mondays and Wednesdays. The Clinics are staffed by Consultant Psychiatrists, one from Sheffield and one from Storthes Hall Hospital. The Mental Welfare Officers attend the Clinics to maintain liaison with the hospital staff.

Mental Subnormality.

The Training Centre at High Green for handicapped children is of great value, and it removes much of the worry and responsibility from the parents, for part of the day at least. Those young people demand nearly 24 hours a day constant supervision, and the relief by attending the Training Centre means a lot to the environmental happiness.

The Care Unit at the Training Centre is now in much greater demand, and the number of children who could be admitted exceeds the accommodation available. We will have to think in terms of sharing the limited accommodation by dividing the time amongst the children, allowing children to have part-time at the Centre. Another alternative is to increase the size of the Care Unit accommodation, and this possibility is very real.

Cases of Subnormality who are being looked after at home, and are not suitable for the Training Centre, are sometimes a problem to the parents, particularly as the parents advance in years and are unable to extend to the patient that loving care and attention which they have given in the past. Some measure of relief can be afforded in those instances by having the patient admitted for short-term care into one of the hospitals for the mentally subnormal. A period of four weeks sometimes relieves the tension, and in some cases helps the patient. Permanent care for those cases is difficult to provide, as accommodation is severely taxed at the moment.

The Care Unit at our Training Centre at High Green was opened on the 12th August, 1963, and in all it caters for seven patients from the whole of the Division. The Training Centre itself, besides providing some form of training for the patients, has an active social programme, and there are regular social evenings held in the premises. The patients attend those meetings with their parents and other relatives.

A modern and complete Centre kitchen was opened in August, 1963, which contains all the up-to-date cooking facilities. The standard of cooking is excellent and there are few, if any, complaints from the patients and staff.

The following are the statistics of the mentally subnormal cases we have in the Penistone area.

Care and Guidance.

<u>16 years and over</u>	<u>Male</u>	<u>Female</u>
In full employment	3	1
Fully employed and/or supervised at home	3	4
Training Centre	2	2
<u>Under 16 years</u>		
Training Centre	1	2
Care Unit (Part-time)... ..	-	2
	<u>9</u>	<u>11</u>

During the year 1 female was admitted to Storthes Hall Hospital, and 1 discharged. After-care was requested in this case.

DISTRIBUTION OF WELFARE FOODS.

The amount of Welfare Foods issued in Penistone Urban District during 1963 was as follows :-

National Dried Milk	820 tins
Cod Liver Oil	150 bottles
Vitamin A and D Tablets	168 (packets of 45)
Orange Juice	1,500 bottles

These foods are issued at the following Centres throughout the Division on the days and times stated :-

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
<u>STOCKSBRIDGE URBAN DISTRICT</u>		
Child Welfare Centre, Miners' Welfare House, Manchester Rd., Stocksbridge.	Tuesday	10 - 12 a.m.
	Friday	1.30 - 3.30 p.m.
		10 - 12 a.m.
Stocksbridge Co-op. Society, Deepcar Branch, Manchester Road, Deepcar.	During shop hours	
<u>PENISTONE URBAN DISTRICT</u>		
Child Welfare Centre, Shrewsbury Road, Penistone.	Monday	2 - 4 p.m.
<u>PENISTONE RURAL DISTRICT</u>		
Child Welfare Centre, Golf Club, Cawthorne.	Alternate Wednesdays	1.30 - 3.30 p.m.
Stocksbridge Co-op. Society, Thurgoland Branch, Thurgoland.	During shop hours	
Mrs. Thickett, Post Office, Oxspring.	During shop hours	
<u>HOYLAND NETHER URBAN DISTRICT</u>		
Mrs. Mellor, Queen Street, Hoyland Common.	Thursday	2 - 4 p.m.
Child Welfare Centre, Miners' Welfare Hall, Hoyland.	Tuesday	11 - 12 a.m.
		2 - 4 p.m.
<u>WORTLEY RURAL DISTRICT</u>		
Clinic, Parish Hall, Oughtibridge.	Thursday	2 - 4 p.m.
Clinic, Memorial Hall, Worrall.	Alternate Tuesdays	2 - 4 p.m.
Child Welfare Centre, Miners' Welfare Hall, Chapelton.	Wednesday	11 - 12 a.m.
		2 - 4 p.m.
Clinic, Methodist Chapel, High Green.	Tuesday	2 - 4 p.m.
Colley Estate Clinic, Wheata Place, Sheffield, 5.	Monday Wednesday	2 - 4 p.m.
		2 - 4 p.m.
Clinic, Methodist Chapel, Norfolk Hill, Grenoside.	Thursday	2 - 4 p.m.

WORTLEY RURAL DISTRICT (Contd.)

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
Child Welfare Centre, Wharncliffe Silkstone Welfare Hall, Pilley, Nr. Barnsley.	Alternate Mondays	2 - 4 p.m.
Child Welfare Centre, Knowle Top, Stannington.	Wednesday	2 - 4 p.m.
Child Welfare Centre, Congregational Church, Loxley.	Alternate Tuesdays	1.30 - 3.30 p.m.
Mrs. Iles, Post Office, Wharncliffe Side.	Friday	2 - 4 p.m.
Mrs. D. Harper, The Shop, Main Road, Dungworth.	During shop hours	

SANITARY CIRCUMSTANCES OF THE AREA

(Prepared by Mr. D. Tutin)

The following is a tabulated list of inspections made during
the year:-

DWELLING HOUSES 1963

Inspections under Housing Regulations	21
Reinspections under Housing Regulations	18
Inspections not under Housing Regulations	103
Reinspections not under Housing Regulations	214

NUMBER OF VISITS TO:

Slaughterhouses	632
Butchers Shops	16
Other Food Premises	58
Public Conveniences	21
Market	132
Licensed Premises	4
Refuse Tips	62

INSPECTIONS UNDER:

Petroleum Acts	13
Factories Acts	15

INFECTIOUS DISEASES:

Primary Visits	9
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DRAINAGE:

New lengths inspected and tested	91
Drainage Nuisances	32

OTHER INSPECTIONS AND VISITS

Rodent Control	84
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NUISANCES ETC. ON BOOKS WITH NUMBER OF NOTICES SERVED

Nuisances in hand, end of 1962	61
Nuisances found during 1963	19
Notices served, informal	19
Nuisances abated during 1963	38
Nuisances outstanding at end of 1963	42

FOOD PREMISES

The following food premises exist in the area:-

- 29 Grocers and General Dealers.
- 6 Confectioners and Sweet Shops.
- 3 Bakehouses.
- 1 Chicken Processing Factory.
- 6 Butchers.
- 3 Greengrocers.
- 2 Snackbars.
- 6 Fried Fish Shops.
- 16 Licensed Premises.

About 29 of the above premises are licensed for the sale of ice-cream and in addition at least 26 mobile food shops and vans are known to operate in the area. In spite of staff shortages during the middle part of the year efforts have been made to maintain a regular inspection of food premises and mobile food shops and vans, and it has been observed that a satisfactory standard has been maintained.

MEAT INSPECTION.

The number of animals slaughtered in the district has again dropped to a figure of just over 18,000. As was noted last year, however, this decrease has been mainly in the smaller animals and the number of cattle killed has actually increased by about 400.

At the end of February the Council lost the services of one of its Public Health Inspectors and after several advertisements were unable to replace him. At the beginning of July, however, they were fortunate in obtaining the services of an Authorised Meat Inspector, Mr. J. McCrossan, who, apart from holiday periods, now undertakes all the meat inspection work. I am happy to report that the meat trade have co-operated with this department in keeping the amount of overtime spent on meat inspection to a minimum. Some statistics regarding meat inspection and private slaughtering are given in Appendix I to this report.

INFECTIOUS DISEASES

During the year all notified cases of infectious disease were visited and where necessary the premises were disinfected.

REFUSE COLLECTION AND DISPOSAL.

In July the Council took delivery of a new refuse collection vehicle and since that time, in spite of a steady increase in building, a reasonably satisfactory service has been maintained.

SALVAGE.

The sale of waste paper during the year realized the sum of £41 0s. 0d.

RODENT CONTROL.

All complaints of rodent infestation were investigated and the necessary treatment carried out. Due to pressure of work, however, the Rodent Operator found it impossible to carry out any routine investigation of the sewerage system as is desirable from time to time, but I am hoping that this situation will improve in the future.

HOUSING & PROPERTY MANAGEMENT.

The scheme for the replacement of obsolete cooking ranges and brick fireplaces by new tiled surrounds was continued and during the year 42 of these conversions were completed. The contract for the painting of 152 houses was let but unfortunately the contractor was unable to complete the work during the year under review. The outstanding part of the work was carried over to the following year.

Towards the end of the year the Council appointed Mr. D. Harrison as Building Inspector to assist in the supervision of housing repairs and I am hoping that this will result in some economies. The total cost of repair work carried out during the year was £9, 395 0s. 0d. Sixteen new Council houses were completed during the year bringing the total number of Council houses at the end of the year to 767.

NEW HOUSES

During the year 31 private houses and 16 Council houses were completed bringing the total number of dwellings in the district to 2576 after making allowance for 6 houses which were closed under the provisions of the Housing Acts.

FACTORIES ACTS.

Appendix II to this report gives the details of factories in the area as required by the Ministry of Health. These factories were visited from time to time and any defects reported to the occupiers.

SEWERS & SEWAGE WORKS

Springvale sewage disposal works continued to be grossly overloaded and their physical condition has generally deteriorated. At one time during the year a tanker had to be employed for removing sludge from the works and generally it has been a question of making the best of a poor job until such time as the new works are in operation. The works at Thurlstone have yielded a poor effluent from time to time and, in view of the large amount of private building in progress in the area, I anticipate that arrangements for them to be pumped into the new sewage works will have to be made as soon as possible after the new scheme is in operation.

CATTLE MARKET.

The table below shows the total number of animals passing through the market during the year. The figures in brackets indicate the numbers during the previous year.

	CATTLE.	CALVES.	SHEEP.	PIGS.	TOTAL.
Dairy	43 (223)	- -	70 (240)	201 (300)	314 (763)
Fatstock	5468 (5060)	624 (475)	4827 (4000)	2812 (2632)	13,731 (12,167)
				TOTAL	14,045 (12,930)

MEAT AND FOOD INSPECTION.

YEAR ENDING DECEMBER, 1963

All animals whose slaughter was notified during the year have been inspected and those showing evidence of disease examined in detail.

The total weight of meat and offal condemned as unfit for human consumption was 12 tons. 7 cwts. 2 qrs. 18 lbs.

	W. MERSDEN.	E. MERSDEN.	HELLINELL.	HINCHLIFF.	TOTAL.
Cows	2963		6	12	2981
Other Cattle	1310	103	132	347	1891
Calves	120		1	1	122
Sheep	6978	75	271	222	7546
Pigs	5655		108	302	6065
				TOTAL	18605

The following table shows the number of animals slaughtered and the percentage affected with tuberculosis or other diseases:-

Class of Animal	Cows	Cattle Excluding Cows	Calves	Sheep and Lambs	Pigs
Number Inspected	2981	1891	122	7546	6065
<u>All disease except Tuberculosis</u>					
Whole carcasses condemned	10	5	3	31	4
Carcasses of which some part or organ was condemned	555	184	4	354	898
Percentage of carcasses affected with disease other than Tuberculosis	18.91%	9.99%	5.73%	5.10%	14.87%
<u>Tuberculosis Only</u>					
Whole carcasses condemned	2				5
Carcasses of which some part or organ was condemned	13	4			143
Percentage of carcasses affected with tuberculosis.	.50%	.21%			2.44%

OVER/.....

Details of carcasses and part carcasses condemned are given below:-

<u>Class of Animal.</u>						<u>Disease or Condition.</u>
3	Carcasses of beef and offal	-	Acute Septic Pneumonia.			
4	" " " " "	-	Acute Septic Peritonitis.			
1	" " " " "	-	General Oedema.			
1	" " " " "	-	Septic Metritis.			
2	" " " " "	-	Generalised Tuberculosis.			
3	" " " " "	-	Fevered.			
2	" " " " "	-	Dead on arrival.			
1	" " " " "	-	Abnormal odour.			
8	Carcasses of mutton and offal	-	Emaciation.			
10	" " " " "	-	Moribund			
6	" " " " "	-	Acute Septic Pneumonia			
2	" " " " "	-	Bruising.			
1	" " " " "	-	Gangrene.			
4	" " " " "	-	Oedema.			
2	Carcasses of veal and offal	-	Badly bled.			
1	" " " " "	-	Pyaemia.			
5	Carcasses of Pork and offal	-	Generalised Tuberculosis.			
1	" " " " "	-	Jaundice.			
2	" " " " "	-	Fevered.			
1	" " " " "	-	Acute Erysipelas.			
1	Part carcase of beef	-	Bruising.			
4	" " " mutton	-	Injury			
2	" " " "	-	Septic Pluerisy			
4	" " " veal	-	Lobar Pneumonia.			
1	" " " pork	-	Arthritis.			
1	" " " "	-	Abscesses.			

The following offals were condemned for various reasons too numerous to set out in detail.

68 Beasts heads and tongues.
5 Beasts stomachs.
62 Beasts lungs.
442 Beasts livers.
21 Beasts hearts.
14 Beasts Kidneys.
39 Beasts intestines.
2 Beasts spleens.
17 Beasts skirts.
11 Cows udders.
420 Pigs lungs.
229 Pigs livers.
101 Pigs plucks.
112 Pigs heads.
28 Pigs intestines.
2 Pigs hearts.
2 Pigs kidneys.
100 Sheeps plucks
247 Sheeps livers.
1 Sheeps intestines.
29 Sheeps lungs.

A P P E N D I X II

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

IN RESPECT OF THE YEAR 1963 FOR THE

URBAN DISTRICT OF PENISTONE

IN THE COUNTY OF YORKSHIRE.

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF THE FACTORIES ACT, 1937

PART I OF THE ACT.

1 - INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH (INCLUDING INSPECTIONS MADE BY PUBLIC HEALTH INSPECTORS)

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Section 1, 2,3,4 and 6 are to be enforced by Local Authorities	1	1		
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	28	11		
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	7	3		
	36	15		

2 - Cases in which DEFECTS were found

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more 'cases')

(1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Sanitary Conveniences (S.7)					
(b) Unsuitable or defective	2	3			
(c) Not separate for sexes					
Total	2	3			

